

LINDE GAS LLC

Certified Mail Return Receipt No. 7003 1680 0004 3886 7216  
PJB 007-04 Name Change Letter

April 1, 2004

Central Registry Program, MC-144  
Texas Commission of Environmental Quality (TCEQ)  
P.O. Box 13087  
Austin, Texas 78711-3087

Subject: Notification of Name Change  
Linde Gas, L.L.C.  
Linde Gas Syngas Plant  
LaPorte, Harris County, Texas  
CN: 600129027  
RN: 100217207

Dear To Whom It May Concern:

Effective January 1, 2004, Linde Gas Inc. was consolidated with sister companies in the United States, to form Linde Gas, L.L.C. The consolidation will change the TCEQ Central Registry Customer Name and Customer information for Linde's Syngas Plant in LaPorte, Harris County, Texas. Linde Gas LLC will be headquartered in Cleveland, Ohio. The email addresses for the Regulated Entity have also been updated. Attached is the Core Data Form with the new information as described above. Please change the information for all the programs checked in section 38 of the Core Data Form.

Please contact me at (713) 767-4189 if you have any questions regarding the name change.

Sincerely,

Linde Gas, L.L.C.

*Patrick Boyle*

Patrick Boyle  
Process Engineer

Attachment: Core Data Form

cc: TCEQ Region 12  
EPA Region 6  
Harris County Pollution Control Dept., Pasadena

2004 APR 1 10:00  
TCEQ REGION 12

Received 04/01/04 10:00  
Harris County  
Pollution Control Dept.

RECEIVED

04 APR 21 AM 9:53

HAZARDOUS WASTE ENF BR  
TEXAS SECTION

67  
Circ  
Copies to  
HT

~~TXR0000374~~ 0003

TXR0000374

2004 APR -6 PM 1:24  
EXTERNAL AFFAIRS DIVISION

RECEIVED

RECEIVED  
04 APR -6 PM 2:18  
US EPA DALLAS  
COMP ASSIGNED  
ENF DIV FILED

# TCEQ Core Data Form

TCEQ Use Only

If you have questions on how to fill out this form or about our Central Registry, please contact us at 512-239-5175.

Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-3282.

## SECTION I: General Information

1. Reason for Submission *Example: new wastewater permit; IHW registration; change in customer information; etc.*

Change of Customer Name, New Federal Tax ID, Change of Customer and Reg. Entity Contact Information

2. Attachments Describe Any Attachments: (ex: Title V Application, Waste Transporter Application, etc.)

X YES NO Cover Letter

3. Customer Reference Number-if issued

4. Regulated Entity Reference Number-if issued

CN 600129027 (9 digits) RN 100217207 (9 digits)

## SECTION II: Customer Information

5. Customer Role (Proposed or Actual) -- As It Relates to the Regulated Entity Listed on This Form

Please check one of the following:

Occupational Licensee

Owner

Operator

X

Owner and Operator

Volunteer Cleanup Applicant

Other

TCEQ Use Only

Superfund

PST

Respondent

6. General Customer Information

New Customer

X

Change to Customer Information

Change in Regulated Entity Ownership

No Change \*

\*If a No Change and Section I is complete, skip to Section III - Regulated Entity Information.

7. Type of Customer:

Individual

Sole Proprietorship - D.B.A.

Partnership

X

Corporation

Federal Government

State Government

County Government

City Government

Other Government

Other:

8. Customer Name (If an individual, please print last name first)

If new name, enter previous name:

Linde Gas, LLC

Linde Gas, Inc.

9. Mailing Address:

P.O. Box 94737

City

State

ZIP

ZIP + 4

Cleveland

OH

44101

4737

10. Country Mailing Information if outside USA

11. E-Mail Address if applicable

jim.arvin@us.linde-gas.com

12. Telephone Number

216-642-6608

13. Extension or Code

14. Fax Number if applicable

216-642-7513

15. Federal Tax ID (9 digits)

470931450

16. State Franchise Tax ID Number if applicable

11339686179

17. DUNS Number if applicable (9 digits)

132970505

18. Number of Employees

0-20

21-100

101-250

251-500

X

501 and higher

19. Independently Owned and Operated?

Yes

X

No

## SECTION III: Regulated Entity Information

20. General Regulated Entity Information

New Regulated Entity

X

Change to Regulated Entity Information

No Change\*

\*If "No Change" and Section I is complete, skip to Section IV - Preparer Information.

<b>21. Regulated Entity Name</b> <i>(If an individual, please print last name first)</i>					
Linde Gas LLC					
<b>22. Street Address</b> (No PO Boxes)		11603 Strang Road			
		City	State	ZIP	ZIP + 4
		LaPorte	TX	77571	
<b>23. Mailing Address</b>		P.O. Box 1058			
		City	State	ZIP	ZIP + 4
		LaPorte	TX	77572	1058
<b>24. E-Mail Address:</b>		pat.boyle@us.linde-gas.com			
<b>25. Telephone Number</b>		<b>26. Extension or Code</b>		<b>27. Fax Number if applicable</b>	
713-767-4175				713-767-4189	
<b>28. Primary SIC Code</b> (4 digits)		<b>29. Secondary SIC Code</b> (4 digits)		<b>30. Primary NAICS Code</b> (5 or 6 digits)	
2813				325120	
<b>31. Secondary NAICS Code</b> (5 or 6 digits)					
<b>32. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description)</b>					
Bulk Industrial Gas Production, Sale of Carbon Monoxide and Hydrogen					
Questions 33 - 37 address geographic location. Please refer to the instructions for applicability.					
<b>33. County</b>		Harris			
<b>34. Description of Physical Location</b>					
Located East of Houston and North of SH 225 (LaPorte Freeway), immediately West of the Houston Ship Channel. 0.5 miles East of the intersection of Strang Rd. and Miller-Cut Off Road.					
<b>35. Nearest City</b>		<b>State</b>		<b>Nearest Zip</b>	
LaPorte		TX		77571	
<b>36. Latitude (N)</b>			<b>37. Longitude (W)</b>		
<i>Degrees</i>	<i>Minutes</i>	<i>Seconds</i>	<i>Degrees</i>	<i>Minutes</i>	<i>Seconds</i>
29	42	36	95	4	17
<b>38. TCEQ Programs In Which This Regulated Entity Participates</b> <i>Not all programs have been listed. Please add to this list as needed. If you don't know or are unsure, please mark "Unknown". If you know a permit or registration # for this entity, please write it below the program.</i>					
	Animal Feeding Operation		Petroleum Storage Tank		Water Rights
X	Title V - Air	X	Wastewater Permit		
X	Industrial & Hazardous Waste		Water Districts		
	Municipal Solid Waste		Water Utilities		Unknown
X	New Source Review - Air		Licensing - TYPE(s)		
<b>Section IV: Preparer Information</b>					
<b>39. Name</b>			<b>40. Title</b>		
Patrick Boyle			Process Engineer		
<b>41. Telephone Number</b>		<b>42. Extension or Code</b>		<b>43. Fax Number if applicable</b>	
713-767-4175				713-767-4189	
<b>44. E-mail Address:</b>		pat.boyle@us.linde-gas.com			

IF #1  
67

MEMO TO FILE  
RE: UNDELIVERABLE MAIL

EPA ID#: TxR000037499

Company Name: Linde Gas Incorporated

Site Location: 11603 B Strange Road, La Porte, Tx 77571-9749

We have attempted to contact the generator through the following sources (check all that apply):

☒ TRACS ☐ Directory Assistance  
☒ Internet ☒ Post Office Markings  
☐ Receiver's Copy of the Manifest  
☐ Other Information From the Receiver

☐ RCRA Info

We talked with:

(See back of form for additional contact info.)

Name: \_\_\_\_\_ of \_\_\_\_\_  
Date: \_\_\_\_\_  
Notes: \_\_\_\_\_

☒ We have found the information needed, as listed below:

New Mailing Address: Linde Gas Incorporated

PO Box 1058

La Porte, Tx 77572-1058

4-18-02

New Contact Person: \_\_\_\_\_

New Phone Number: \_\_\_\_\_

And have noted that:

- ☐ The company is out of business and no longer generating hazardous waste.  
☐ The company is a non-industrial CESQG and does not need to be registered.  
☐ The company is an industrial CESQG which generates less than 220 pounds Class 1 waste per month and does not need to be registered.  
☐ The company has moved and is no longer at this address:

They do/ do not need to be registered.

Their new numbers are: State \_\_\_\_\_

This address is occupied by:

EPA \_\_\_\_\_

Phone: \_\_\_\_\_

Log 870

Harris CO

Region 12

TXID 11339686179



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 6

1445 ROSS AVENUE, SUITE 1200  
DALLAS, TX 75202-2733

October 24, 2000


LINDE GAS INC  
11603 B STRANG ROAD  
LA PORTE, TX 77571  
ATTN: PAT BOYLE, PROC ENGINEER

This is to acknowledge that, in compliance with Section 3010 of the Resource Conservation and Recovery Act (RCRA), you have filed a Notification of Regulated Waste Activity for:

LINDE GAS INC  
11603 B STRANG ROAD  
LA PORTE, TX 77571

Your EPA Identification Number for this installation  
is: **TXR000037499**

The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Biennial Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage, and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste reports and documents required under Subtitle C of RCRA. A Subsequent Notification of Regulated Waste Activity is requested should any information on the original document change.

  
Charles Faultry, Chief  
RCRA Information Management Section

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

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AUG 29 2008

Please refer to Section V, Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

3 INKUC-WASTE EVALUATION  
(For Official Use Only)

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒

A. Initial Notification

☐

B. Subsequent Notification  
(Complete Item C)

C. Installation's EPA ID Number

T X R 0 0 0 0 3 7 4 9 9

## II. Name of Installation (Include company and specific site name)

L I N D E G A S I N C

## III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

1 1 6 0 3 - B S T R A N G R O A D

Street (Continued)

City or Town

L a P O R T E

State

Zip Code

T X

7 7 5 7 1 -

County Code

County Name

1 0 1 H A R R I S

## IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

S A M E

City or Town

State

Zip Code

## V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

B O Y L E

(First)

P A T

Job Title

P R O C E N G I N E E R

Phone Number (Area Code and Number)

7 1 3 - 7 6 7 - 4 1 7 5

## VI. Installation Contact Address (See Instructions)

A. Contact Address Location

Mailing

☒

B. Street or P.O. Box

S A M E

City or Town

State

Zip Code

## VII. Ownership (See Instructions)

### A. Name of Installation's Legal Owner

S A M E

Street, P.O. Box, or Route Number

City or Town

State

Zip Code

Phone Number (Area Code and Number)

- -

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

☒

No

(Date Changed)

Month

Day

Year

0 1 1 8 9 9

✓  
b6  
9/18/08  
#526  
9-27-08  
SS

Typed Name

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Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions)

## A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☒ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only
- ☐ b. For commercial purposes

## Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see Instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers

c. Boiler and/or Industrial Furnace

Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace

☐ 5. Underground Injection Control

## B. Used Oil Recycling Activities

1. Used Oil Recycling Marketer

- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

2. Used Oil Burner - Indicate Type(s) of Combustion Device

- ☐ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace

3. Used Oil Transporter - Indicate Type(s) of Combustion Device(s)

- ☐ a. Transporter
- ☐ b. Transfer Facility

4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process
- ☐ b. Re-refine

## IX. Description of Regulated Wastes (Use additional sheets if necessary)

## A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)

☒

2. Corrosive (D002)

☒

3. Reactive (D003)

☐

4. Toxicity Characteristic

☒

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

F 0 0 1 F 0 0 2 F 0 0 3 F 0 0 5

## B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1
D 0 0 1
7

2
D 0 0 2
8

3
D 0 0 9
9

4
D 0 3 5
10

5
D 0 3 9
11

6
D 0 4 0
12

## C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1

2

3

4

5

6

## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Patrick J. Boyle

Name and Official Title (Type or print)

Pat Boyle, Process Engineer

Date Signed

Aug. 25, 2000

## XI. Comments

This facility was formerly owned and operated by Millennium Petrochemicals, Inc. HW Permit # 50231

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)